PTO/SB/05 (11-00)

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Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. Michael Yip First Inventor

Title | Method and System to Aggregate Multiple VLANs in a Metropolitan Area

2717P030

Networkahel No FI 034438083115

(Only for new nonprovisional applications under 37 CFR 1.53(b))	DIESS Wall Label	VO. ELU344369	0300					
APPLICATION ELEMENTS	i		Assistant (Commissio	ner for Pate	ents		
See MPEP chapter 600 concerning utility patent application con	otents A	ADDRESS TO: Box Patent Application Washington, DC 20231						
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an onginal and a duplicate for fee processing)	^{7.} 🗖	CD-ROM or CD-R in Computer Program (large table	or	ը ■		
 Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages 22] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications 	(ji] a.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or						
 Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, 	c.	ii.	tity of above		Ď 📕			
or a computer program listing appendix - Background of the Invention	<u> </u>	c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS						
 Brief Summary of the Invention Brief Description of the Drawings (if filed) 	9.	9. Assignment Papers (cover sheet & document(s))						
Detailed DescriptionClaim(s)	10.							
- Abstract of the Disclosure	11. 🗖	English Translation	Document	(if applicab	le)			
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 3]	12. □	Information Disclos Statement (IDS)/PT	ure		Copies of Citations	IDS		
5. Oath or Declaration [Total Pages 3]	13. 🗖	Preliminary Amend						
a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R. §	1.63(d))							
i. DELETION OF INVENTOR(S)	npleted) 15.							
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b) c. Unsigned	^{16.} \square	Request and Certifi Applicant must atta						
	17.	Other:						
6. Application Data Sheet. See 37 CFR 1.76	1 -	***********	• • • • • • • • • • • • • • • • • • • •					
18. If a CONTINUING APPLICATION, check appropriate b	oox, and supply th			l in a prelim	inary amer	ndment:		
☐ Continuation ☐ Divisional ☐ Continu	ıation-in-part (CIF	of prior applica	tion No:					
Prior application Information: Examiner			Group/Art U	Init:				
For <u>CONTINUATION OR DIVISIONAL APPS only:</u> The entire dis Box 5b, is considered a part of the disclosure of the accompany	ying continuation of	r divisional application	and is hereb	y incorporat	is supplied u ted by refere	inder ence.		
The incorporation can only be relied upon when a portion has t			ted applicati	ion parts.				
18. CORRESPONDENCE ADDRESS								
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Name								
740/110								
Address								
City	State	1	Zip	Code	1			
	Telephone			Fax				

Donna Jo Coningsby

Name (Print/Type)

Signature

Registration No. (Attorney/Agent)

Date

41,684

01/05/01

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

(\$)	942.00

Complete if Known						
Application Number						
Filing Date	January 5, 2001					
First Named Inventor	Michael Yip					
Examiner Name						
Group/Art Unit Attorney Docket No.	2717P030					

M	ETHOD	OF P	AYMENT (check of	ne)	FEE CALCULATION (continued)							
1. 🛛			er is hereby authorized to		3. ADDITIONAL FEE							
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Fee Fee		Fee	Fee Description	Fee Paid	128	1,890	228	945	Extension for r	esponse within	fifth month	
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106 320		160	Design filing fee	710.00	120	310	220		•	support of an	appeal	
107 490		245	Plant filing fee		121	270	221		Request for or	•		
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2. EXTI	KA CLAII		Claims below	1	144	600	244		Plant issue fee			
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Fee Fee	Fee Code	Fee (\$)	Fee Description		146	710	246	355	(37 CFR § 1.1)	ssion after final	rejection	
Code (\$) 103 18		(\$) 9	Claims in excess of 2	20	149	710	249	355		ional invention	to be	
102 80		-	Independent claims i		ſ				examined (37	CFR § 1.129(b)))	
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110 18	3 210	9	**Reissue claims in e		Other	fee (sp	ecify)					
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SUBTOTAL (2) (\$) 232.00 *					*Reduc	ed by Ba	sic Filing	Fee Pa	aid §	SUBTOTAL (3)	(\$)	
SUBMITTED BY Complete (if applicable)												
	Name (Print/Type) Donna Jo Coningsby Registration No. 41.684 Telephone (503) 684-6200											

01/05/01